

COMBINED DECLARATION AND POWER OF ATTORNEY

944-003.097
(Docket Number)

#3

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **BATTERY PACK FOR ELECTRONIC DEVICE**,

the specification of which is attached hereto unless the following box is checked: ☒. If the box is checked,

the application was filed on **November 1, 2001**

as U.S. Application Number **10/033,534**

or PCT International Application Number

and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application			Priority Not Claimed
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>

To the extent permitted by rule or law, I hereby incorporate by reference the Prior Foreign Application(s) listed above.

I hereby claim the benefits under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

(Provisional Application Number)	(Day/Month/Year Filed)
(Provisional Application Number)	(Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability, as defined in 37 CFR §1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number)	(Day/Month/Year Filed)	(Status--patented, pending, abandoned)
(Application Number)	(Day/Month/Year Filed)	(Status--patented, pending, abandoned)

I hereby appoint the attorney(s) and/or agent(s) assigned to the customer number listed below, as may from time to time be amended, belonging to the firm of **Ware, Fressola, Van Der Sluys & Adolphson LLP**, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number

4955



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PATENT TRADEMARK OFFICE

Address all telephone calls to: Ware, Fressola, Van Der Sluys & Adolphson LLP at (203) 261-1234. Address all correspondence to:

Customer Number


4955

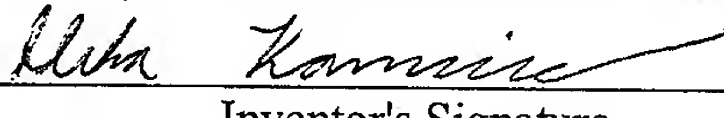


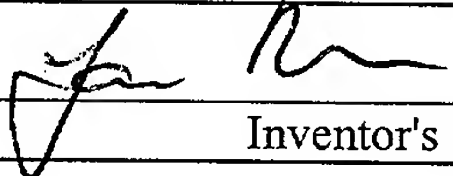
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PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

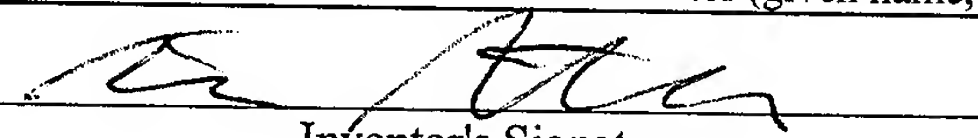
Jussi HOVI Full name of sole or first inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
 Inventor's Signature	<u>30.01.2002</u> Date
Salo, Finland Residence	Finland Citizenship
Post Office Address: Paijontie 27, FIN-24280 Salo, Finland	

Mika KANNINEN Full name of second inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
 Inventor's Signature	<u>30.01.2002</u> Date
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Jari ASTALA Full name of third inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
 Inventor's Signature	<u>28.01.2002</u> Date
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Post Office Address: Hatanpaan valtatie 12 C 51, FIN-33100 Tampere, Finland	

☒ Additional inventors are being named on separately numbered sheets attached hereto.

Additional Joint Inventors

Nina NUMMENTALO <small>Full name of fourth inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)</small>	
 <small>Inventor's Signature</small>	<u>30.1.2002</u> <small>Date</small>
Salo, Finland <small>Residence</small>	Finland <small>Citizenship</small>
Post Office Address: Pahkinarinne 22, FIN-24240 Salo, Finland	

<small>Full name of fifth inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)</small>	
<hr style="border: none; border-top: 1px solid black;"/> <small>Inventor's Signature</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Date</small>
<hr style="border: none; border-top: 1px solid black;"/> <small>Residence</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Citizenship</small>
Post Office Address:	

<small>Full name of sixth inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)</small>	
<hr style="border: none; border-top: 1px solid black;"/> <small>Inventor's Signature</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Date</small>
<hr style="border: none; border-top: 1px solid black;"/> <small>Residence</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Citizenship</small>
Post Office Address:	

<small>Full name of seventh inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)</small>	
<hr style="border: none; border-top: 1px solid black;"/> <small>Inventor's Signature</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Date</small>
<hr style="border: none; border-top: 1px solid black;"/> <small>Residence</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Citizenship</small>
Post Office Address:	

<small>Full name of eighth inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)</small>	
<hr style="border: none; border-top: 1px solid black;"/> <small>Inventor's Signature</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Date</small>
<hr style="border: none; border-top: 1px solid black;"/> <small>Residence</small>	<hr style="border: none; border-top: 1px solid black;"/> <small>Citizenship</small>
Post Office Address:	

☐ Additional inventors are being named on separately numbered sheets attached hereto.



Practitioner's Docket No. 944-003.097

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: J. Hovi et al:

Serial No.: 0 10 / 033,534

Group No.: 2838

Filed: November 1, 2001

Examiner: Not Yet Assigned

For: BATTERY PACK FOR ELECTRONIC DEVICE

Assistant Commissioner for Patents
Washington, D. C. 20231

**TRANSMITTAL OF FORMAL DRAWING(S)
PRIOR TO NOTICE OF ALLOWANCE**

Attached please find the formal drawings for this application.


SIGNATURE OF PRACTITIONER

Reg. No. 31,052

Jack M. Pasquale

(type or print name of practitioner)

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NOTE: "Identifying indicia, if provided, should include the application number or the title of the invention, inventor's name, docket number (if any), and the name and telephone number of a person to call if the Office is unable to match the drawings to the proper application. This information should be placed on the back of each sheet of drawings a minimum distance of 1.5 cm. (5/8 inch) down from the top of the page. In addition, a reference to the application number, or, if an application number has not been assigned, the inventor's name, may be included in the left-hand corner, provided that the reference appears within 1.5 cm (5/8 inch) from the top of the sheet." 37 C.F.R. 1.84(c)).

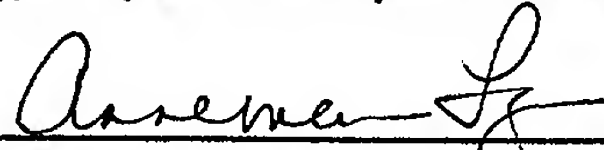
CERTIFICATE OF MAILING (37 C.F.R. 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231.

Annemarie Lazor

(type or print name of person mailing paper)

Date: March 28, 2002



Signature of person mailing paper

WARNING: "Facsimile transmissions are not permitted and if submitted will not be accorded a date of receipt" for "(4) Drawings submitted under §§ 1.81, 1.83 through 1.85, 1.152, 1.165, 1.174, 1.437" 37 C.F.R. 1.6(d)(4).

Transmittal of Formal Drawings [5-2])